

**GOVERNMENT OF ANDHRA PRADESH
COMMERCIAL TAXES DEPARTMENT**

FORM VAT 125

NOTICE OF COMPULSORY CANCELLATION OF VAT REGISTRATION

[See Rule 14 (8)]

Date Month Year

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01. Tax Office Address: _____

02	TIN																	
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03. Name : _____
Address: _____

I have to advise you that your VAT registration is proposed to be cancelled with effect from _____ because: (Strike off statements not applicable / Tick appropriate boxes)

- * You are not required nor entitled to apply for registration.
- * You have not declared taxable sales since VAT registration over a period of three continuous months.
- * You have no fixed place of abode or business.
- * You have failed to keep proper accounting records relating to your business activities.
- * You have not submitted correct and complete VAT returns.
- * You are required to file a final VAT return for the period ending _____ enclosed herewith and account for VAT on any stock or assets on hand on which you have received a refund of input tax.
- * It is noted that you have arrears of VAT unpaid of _____ payment of this amount must be made with your final return.

YOU ARE REMINDED THAT YOU MUST NOT CHARGE VAT

AND ISSUE TAX INVOICES AFTER _____ You are requested to file written objections if any along with documentary evidence within 10 days of date of this letter failing which your VAT registration will be cancelled without any further notice.

**COMMERCIAL TAX OFFICER,
VAT REGISTERING AUTHORITY,
_____ CIRCLE.**